

# APPLICATION FOR EMPLOYMENT

Equal Opportunity Employer

**Important Legal Notice:** An employer may not use any information provided by a job applicant in a way which results in illegal discrimination against the job applicant under applicable federal, state, or local law. For example, an employer may be subject to legal liability for denying a job opportunity to an applicant on the basis of information provided by the applicant regarding his or her educational background unless the information is reasonably related to the applicant's ability to perform the job or there is an otherwise legitimate business reason.

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## PERSONAL INFORMATION

NAME \_\_\_\_\_  
(Last) (first) (Middle)

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_

STATE \_\_\_\_\_ ZIP \_\_\_\_\_ TELEPHONE \_\_\_\_\_  
(Area Code/Number)

Are you legally authorized to work in the US: Yes \_\_\_\_\_ No \_\_\_\_\_

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## POSITION DESIRED

POSITION \_\_\_\_\_ SALARY/WAGES EXPECTED \_\_\_\_\_

DATE YOU CAN START \_\_\_\_\_

ARE YOU EMPLOYED NOW? \_\_\_\_\_ CAN WE QUESTION YOUR PRESENT EMPLOYER? \_\_\_\_\_

HAVE YOU EVER APPLIED TO THIS COMPANY BEFORE? \_\_\_\_\_

IF SO, WHERE? \_\_\_\_\_ WHEN? \_\_\_\_\_

(Cont.)

## IMPORTANT NOTICE TO APPLICANTS

Under Illinois law, job applicants are not obligated to disclose sealed or expunged records of conviction or arrest or expunged juvenile records of conviction or arrest.

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### EMPLOYMENT HISTORY

DATES	EMPLOYER AND ADDRESS	JOB TITLE/DESCRIPTION OF DUTIES
1. _____ TO _____	_____ _____	_____ _____
2. _____ TO _____	_____ _____	_____ _____
3. _____ TO _____	_____ _____	_____ _____
4. _____ TO _____	_____ _____	_____ _____

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### EDUCATION \_\_\_\_ (Complete only if marked by prospective employer as required for position)

NAME OF SCHOOL	LOCATION	COURSE/DEGREE
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

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### TRAINING OR SPECIAL STUDY \_\_\_\_ (Complete only if marked by prospective employer as required for position)

_____
_____
_____

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### REFERENCES

Give the names of three persons not related to you, that you have known for at least one year.

NAME	ADDRESS	PHONE NO.	OCCUPATION	YEARS KNOWN
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

(Cont.)

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**LIST OF ESSENTIAL JOB-RELATED FUNCTIONS** (These will be filled in by the prospective employer)

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT, IF EMPLOYED, FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL.

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND THE REFERENCES LISTED ABOVE TO GIVE ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT.

DATE: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

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**DO NOT WRITE BELOW THIS LINE - FOR EMPLOYER USE ONLY**

INTERVIEWED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

COMMENTS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

HIRE: YES \_\_\_\_\_ NO \_\_\_\_\_

POSITION: \_\_\_\_\_ DEPARTMENT: \_\_\_\_\_

SALARY/WAGE: \_\_\_\_\_ REPORT DATE: \_\_\_\_\_

APPROVED: 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_  
                    Manager                      Dept. Head                      General Manager

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